

In re Application of: Kovesdi et al.

Application No. 09/599,997

Filed: June 23, 2000

For: **JUN 24 2003** VIRAL VECTOR ENCODING PIGMENT EPITHELIUM-DERIVED FACTOR

Mail Stop Non-Fee Amendment

Commissioner for Patents

P.O. Box 1436

Alexandria, VA 22313-1450

Sir,

Transmitted herewith is a response to an restriction requirement in the subject application.

☐ Applicants claim small entity status of this application under 37 CFR 1.27.☒ **Petition for Extension of Time**☐ Applicants petition for a extension of time under 37 CFR 1.136, the fee for which is (enclosed).☒ Applicants believe that no petition for an extension of time is necessary. However, to the extent that such petition is deemed necessary, Applicants hereby petition for a sufficient extension of time to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee.☒ No additional claim fee is required.☐ Other:

The claim fee has been calculated as shown below:

|                          |   |       |   |                            | SMALL ENTITY |                        | OTHER THAN A SMALL ENTITY |                        |
|--------------------------|---|-------|---|----------------------------|--------------|------------------------|---------------------------|------------------------|
|                          | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | EXTRA<br>CLAIMS<br>PRESENT | RATE         | ADDIT.<br>CLAIM<br>FEE | RATE                      | ADDIT.<br>CLAIM<br>FEE |
| TOTAL                    | 30  | MINUS | 37  | =                          | x 9=         | \$                     | x 18=                     | \$0.00                 |
| INDEPENDENT              | 2   | MINUS | 3   | =                          | x 42=        | \$                     | x 84=                     | \$0.00                 |
| <input type="checkbox"/> | FIRST PRESENTATION OF MULTIPLE CLAIM      |       |   |                            | + 140=       | \$                     | + 280=                    | \$0.00                 |
|                          |   |       |   |                            | TOTAL        | \$                     | TOTAL                     | \$0.00                 |

☐ Please charge my Deposit Account No. 12-1216 in the amount of \$ . A duplicate copy of this sheet is attached.☐ A check in the amount of \$ is attached.☒ The Commissioner is hereby authorized to charge any deficiencies in the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-1216. A duplicate copy of this sheet is attached.☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.☒ Any patent application processing fees under 37 CFR 1.17.Respectfully submitted,  
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By

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